Filed 06/24/19 Entered 06/24/19 10:01:29 Desc Main Case 18-21421-MBK Doc 36

		Document	Page For
Fill in this info	ormation to identify your	case:	
Debtor 1	Heather M Pizza		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	18-21421		
(if known)			

■ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	183,556.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,220.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	188,776.0
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	258,697.00
<b>3.</b>	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	16,567.00
	Your total liabilities	\$	275,264.00
Par	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,007.17
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,609.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
<b>7</b> .	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	submit this form to

the court with your other schedules.

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Debtor 1 Heather M Pizza Document Page 2 of 7
Case number (if known) 18-21421

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_1,350.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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EW	to this to force of a fact that the contract					ı				
	in this information to identify your of the state of the									
Det	otor 1 Heather M F	'izza			_					
	otor 2 use, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF NEW J	ERSEY		_					
Cas	se number 18-21421					Che	ck if this is	:		
(If kr	nown)						An amende	ed filing		
									g postpetition llowing date:	
0	fficial Form 106l					ī	MM / DD/ `	YYYY		
S	chedule I: Your Inc	ome								12/1
sup spo	es complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filir ir spouse is not filing wi	ng jointly, and your th you, do not inclu	spouse i de inforr	s liv natio	ing with on aboເ	n you, incl it your sp	ude informouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or non-fil	ing spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				□ Not e	employed		
	. ,	Occupation	in home design							
	Include part-time, seasonal, or self-employed work.	Employer's name	Pottery Barn (W	/illiam S	one	oma)				
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed th	nere? March	2018						
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	ou have nothing to r	eport for	any	line, writ	e \$0 in the	space. Inc	lude your no	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		mbine the informatio	n for all e	mplo	oyers for	that perso	on on the lir	nes below. If	you need
						For De	btor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1	,243.67	\$	N/A	-
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	1,2	43.67	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Debt	tor 1	Heather M Pizza	_	C	Case numb	oer (if known)	18-2	1421		
					Far Dah	tou 1	Гог	Dobtor	2	
					For Deb	tor i		Debtor -filing s		
	Con	y line 4 here	4.		\$	1,243.67	\$	i iiiiig s	N/A	
	996	y line 4 here	••		*	1,2-10.01	·		1473	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	136.50	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	l.	\$	0.00	\$		N/A	_
	5e.	Insurance	5e	<b>)</b> .	\$	0.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$	0.00	\$		N/A	=
	5g.	Union dues	5g	J.	\$	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h	1.+	\$	0.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	:	\$	136.50	\$		N/A	=
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,107.17	\$		N/A	_
8.		all other income regularly received:			·	1,101111	· · –		14,71	-
0.	8a.	Net income from rental property and from operating a business,								
		profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total	0-		Ф	0.00	æ		21/4	
	8b.	monthly net income. Interest and dividends	8a 8b		\$	0.00	·		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent		٠.	Ψ	0.00	Ψ_		N/A	-
	oc.	regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c		\$	900.00	. \$		N/A	_
	8d.	Unemployment compensation	8d		\$	0.00	\$_		N/A	_
	8e.	Social Security	8e	<del>)</del> .	\$	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance								
		that you receive, such as food stamps (benefits under the Supplemental								
		Nutrition Assistance Program) or housing subsidies.								
		Specify:	8f.		\$	0.00	\$		N/A	
	8g.	Pension or retirement income	8g	,	\$	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	1.+	\$	0.00	+ \$		N/A	_
•	A .I .	Lall other transmiss. A LLE	0	_						
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	·	900.00	\$_		N/A	4
			Г	_						
10.			10.	\$_	2,00	) <b>7.17</b> + \$		N/A	= \$ _	2,007.17
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L							
11.	Stat	e all other regular contributions to the expenses that you list in Schedule	J.							
		ude contributions from an unmarried partner, members of your household, your	depe	ende	ents, you	r roommate	s, and			
		er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	انمير	مامام	to nov o	waanaa li	مناممه	Saha du la		
	Spe	,	avalla	abie	to pay e	expenses iis	stea in s	11.	_	0.00
	Орс								Ψ_	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The res	ult is	the	combine	ed monthly	income			
		e that amount on the Summary of Schedules and Statistical Summary of Certai							•	2 007 17
	app	ies						12.	»	2,007.17
								•	Combi	
40	Б-		_						monthl	y income
13.	Do :	you expect an increase or decrease within the year after you file this form' No.								
		Ves Evolain:								

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Fill in	this informa	tion to identify yo	our case:								
Debtor		Heather M Pi				Ch		this is:			
	Debtor 2 (Spouse, if filing)						A supplement showing postpetition chapter 13 expenses as of the following date:				
United	States Bankr	uptcy Court for the:	DISTRI	CT OF NEW JERSEY			MN	I / DD / YYYY			
Case n		3-21421									
Offi	icial Fo	rm 106J									
Sch	nedule	J: Your I	Exper	ises					12/1		
inforn	nation. If m		eded, atta	. If two married people a ch another sheet to this n.							
Part 1		ibe Your House	hold								
_	s this a joir										
	■ No. Go to □ Yes. <b>Doe</b>		n a separ	ate household?							
_			ш оорш								
	☐ Y	es. Debtor 2 mus	t file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2	2.			
2.	Oo you have	e dependents?	□ No								
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		_	Dependent's age	Does dependent live with you?		
	Do not state dependents				child			6	□ No ■ Yes		
					child			8	□ No ■ Yes		
					child			10	□ No ■ Yes		
									□ No □ Yes		
е	expenses o	enses include f people other tl d your depende	nan <sub>—</sub>	No Yes					□ Yes		
exper	ate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a sup							
the va		n assistance and		government assistance cluded it on <i>Schedule I:</i>				Your expe	enses		
		r home owners		ses for your residence.	Include first mortgage	e 4.	\$_		1,812.00		
H	f not includ	ed in line 4:									
4	la. Real e	state taxes				4a.	\$		0.00		
		rty, homeowner's				4b.	\$		0.00		
				upkeep expenses		4c.	_		0.00		
		owner's associat nortgage payme		dominium dues <b>our residence,</b> such as ho	ome equity loans	4d. 5.			0.00		

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Debtor 1	Heather M Pizza		Case num	ber (if known)	18-21421
6. Utilit	ties:				
6a.	Electricity, heat, natural gas		6a.	\$	225.00
6b.	Water, sewer, garbage collection		6b.	\$	66.00
6c.	Telephone, cell phone, Internet, satellite, a	and cable services	6c.	·	195.00
6d.	Other. Specify:	and capie convices	6d.		0.00
	d and housekeeping supplies		7.	\$	500.00
	dcare and children's education costs		8.	\$	
			9.	\$	0.00
	hing, laundry, and dry cleaning sonal care products and services		9. 10.	·	75.00
	•			\$	75.00
	ical and dental expenses	antas'a fan	11.	\$	25.00
	<b>nsportation.</b> Include gas, maintenance, bus not include car payments.	or train fare.	12.	\$	100.00
	ertainment, clubs, recreation, newspapers	e magazines and books	13.	·	50.00
		_	14.		
	ritable contributions and religious donati	IUIIS	14.	Ψ	0.00
5. <b>Insu</b>	ir <b>ance.</b> not include insurance deducted from your pa	ay or included in lines 4 or 20			
	Life insurance	y of included in intes 4 01 20.	15a.	\$	0.00
	Health insurance		15b.		0.00
	Vehicle insurance		15b.	·	111.00
	Other insurance. Specify:		15d.		
	es. Do not include taxes deducted from your	r nav or included in lines 4 or 20		Ψ	0.00
o. raxe Spec		i pay or included in lines 4 or 20.	16.	\$	0.00
	allment or lease payments:			<b>—</b>	0.00
	Car payments for Vehicle 1		17a.	\$	350.00
	Car payments for Vehicle 2		17a. 17b.	·	0.00
	Other. Specify:		17b.	·	0.00
	Other. Specify:		17d.		0.00
	r payments of alimony, maintenance, and	d support that you did not roport a		Ψ	0.00
	ucted from your pay on line 5, <i>Schedule I</i>			\$	0.00
	er payments you make to support others		•	\$	0.00
Spec		•	19.		
	er real property expenses not included in	lines 4 or 5 of this form or on Sch		ur Income.	
	Mortgages on other property		20a.		0.00
	Real estate taxes		20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurar	nce	20c.	\$	0.00
	Maintenance, repair, and upkeep expense		20d.	\$	0.00
	Homeowner's association or condominium		20e.		0.00
	er: Specify: pets	4400	21.	· -	25.00
. Jule	pela pela			- Ψ	23.00
	culate your monthly expenses				
22a.	Add lines 4 through 21.			\$	3,609.00
22b.	Copy line 22 (monthly expenses for Debtor	2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your me	onthly expenses.		\$	3,609.00
				-	
	culate your monthly net income.			•	
	Copy line 12 (your combined monthly inco		23a.		2,007.17
23b.	Copy your monthly expenses from line 22	c above.	23b.	-\$	3,609.00
23c.	Subtract your monthly expenses from your	r monthly income.	23c.	\$	-1,601.83
	The result is your <i>monthly net income</i> .		230.	Ψ	1,001.00
4 Do v	ou expect an increase or decrease in you	ur expenses within the year after y	ou file this	form?	
	example, do you expect to finish paying for your ca				ease or decrease because o
	fication to the terms of your mortgage?		33-1	, , , , , , , , , , , , , , , , , , , ,	
_	 In				
■ N	10.				

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Fill in this info	rmation to identify your	case:		
Debtor 1	Heather M Pizza			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number	18-21421			
(if known)				Check if this is an amended filing

#### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Di	d you pay or agree to pay someone who is	NOT an attorney to help you fill out bankru	ptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have not they are true and correct.  /s/ Heather M Pizza Heather M Pizza Signature of Debtor 1	read the summary and schedules filed with  X  Signature of Debtor	
	Date <b>June 24, 2019</b>	Date	